

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

101703  
10/1688368**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)  
*(Submit an original and a duplicate for processing)*
- Applicant claims small entity status.
- Specification [Total Pages 26]   
*(preferred arrangement set forth below)*
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed Sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (*if filed*)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 7]   
*(for continuation/divisional with Box 18 completed)*
- Oath or Declaration [Total Pages 3]
  - Newly executed (original or copy)
  - Copy from a prior application (37 CFR 1.63(d))

i.  **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(i)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation     Divisional     Continuation-in-part (CIP)

of prior application No.: \_\_\_\_\_

Group Art Unit: \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label		23915 (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below	
Name	Leonard A. Alkov, Esq.				
Address	Raytheon Company				
	P.O. Box 902 (E4/N119)		State	CA	Zip Code
City	El Segundo	Telephone	310.647.2577	Fax	310.647.2616
Country	USA				
Name (Print/Type)	Leonard A. Alkov	Registration No. (Attorney/Agent)		30,102	
Signature			Date	10/17/2003	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Attorney Docket No. PD-02W135

First Inventor Tayrani

Title Efficient Broadband Switching-Mode Amplifier

Express Mail Label No. EU430994377US

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 202317.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)8. Nucleotide and/or Amino Acid Sequence Submission  
*(if applicable, all necessary)*a.  Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i.  CD-ROM or CD-R (2 copies); orii.  paperc.  Statements verifying identity of above copies**ACCOMPANYING APPLICATION PARTS**9.  Assignment Papers (cover sheet & document(s))10.  37 CFR 3.73(b) Statement  Power of Attorney  
*(when there is an assignee)*11.  English Translation Document *(if applicable)*  Copies of IDS Citations12.  Information Disclosure Statement (IDS)/PTO-144913.  Preliminary Amendment14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*15.  Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*16.  Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.17.  Other: \_\_\_\_\_

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1120.00)

## Complete If Known

Application Number
Filing Date
First Named Inventor
Examiner Name
Art Unit
Attorney Docket No.

PD-02W135

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None
 Deposit Account:

Deposit Account Number	50-0616
Deposit Account Name	Raytheon Company

The Director is authorized to: (check all that apply)

- 
- Charge fee(s) indicated below
- 
- Credit any overpayments
- 
- 
- Change any additional fee(s) during the pendency of this application
- 
- 
- Charge fees indicated below, except for the filing fee
- 
- to the above-identified deposit account.

## FEE CALCULATION (continued)

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	750.00
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>			<b>(\$ 750.00)</b>

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims -20** =	Fee from below	Fee Paid
29	9	x 18	= 162
Independent Claims	5	- 3** =	x 84 = 168
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		<b>(\$ 330.00)</b>

\*or number previously paid, if greater. For Reissues, see above

Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** (\$ 40.00)

(Complete if applicable)

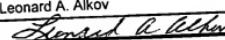
## SUBMITTED BY

Name (Print/Type) Leonard A. Alkov

Registration No.

(Attorney/Agent) 30,021

Telephone 310.647.2577

Signature 

Date 10/16/2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.